NQAC
Nestlé Quality Assurance Center
Dublin

Nestle USA, Inc.
6625 Eiterman Road
Dublin, Ohio 43016

Probiotic Sample Submission Requirements

_____ **Sample description**

_____ **Serving size (in grams)**

_____ **Total capsule weight (if applicable)**

#	Probiotic Strain	Amount per Serving (CFU or other unit)
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

Please note:

****Print and add this form in the box with the sample submission and ARF. This will need to be completed for each sample containing probiotics. The type of organism and levels will determine sample dilutions and media that is required for sample processing to produce accurate results. This form will need shipped with the samples to avoid delays.****